Luke A.

Typed or printed name

KILYK BOWERSOX PLLC

PART B - FEE(S) TRANSMITTAL

nplete and sengthis form, together with applicable fee(s), to: Mail Mail Stop ISSUE FLE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

NSTRUCTIONS: This peropriate. All further indicated unless correct indi	TEST DESIGNA OF STREETS OF	for transmitting the ISS ing the Patent, advance of therwise in Block 1, by	UE FEE and PUBLICAT orders and notification of (a) specifying a new corre	TION FEE (if requi maintenance fees we espondence address;	red). Blocks 1 the vill be mailed to a and/or (b) indica	rough 5 sh he current ting a separ	could be completed where correspondence address as rate "FEE ADDRESS" for				
		Hock I for any change of address)	No Fe pa	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
33432	7590 01/1	8/2007	nav	e its own certificate	of mailing or train	smission.					
400 HOLIDAY SUITE 102		.C.	I b Sta ade trai	Certificate of Mailing or Transmission I bereby certify that this Fec(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2385, on the date indicated below.							
WARRENTON	, VA 20100	•		Kim Blum		(Depositor's name)					
				Simk		(Signature)					
				February 26	2007		.(Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.			CONFIRMATION NO.				
10/776,970	02/11/2004		Koji Kishi		3190-011-0	1	3712				
TLE OF INVENTION: BEAGESTANT ROBERS FOR THE CHICAGO CH											
			Detecting Cho	lesterol In	a High De	nsity	·				
	Lipoprotein	or Low Density	Lipoprotein	•		•					
APPLN. TYPE	SMALL ENTITY	ISSUE FEB DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEB TOTAL F	EE(S) DUE	DATE DUE				
nonprovisional	МО	\$1400	\$300	\$0	\$1	700	04/18/2007				
EXAMINER		ART UNIT	CLASS-SUBCLASS	1							
GITOMER	, RALPH J	1657	435-011000								
Change of corresponde R 1.363).	ence address or indicatio	n of "Fee Address" (37	2. For printing on the patent front page, list								
_ ′	ondence address (or Cha 3/122) attached	inge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, P. L. L. C.								
☐ "Fee Address" indi	cation (or "Fee Address	" Indication form and. Use of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.								
ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON 1	THE PATENT (print or ty	oc)			·····				
ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.											
(A) NAME OF ASSIC	GNEE		(B) RESIDENCE: (CITY								
Sysmex C	orporation		Hyogo, Japan								
ase check the appropri	ate assignee category or	categories (will not be pr	inted on the patent) :	Individual 🛭 Con	poration or other p	rivate group	p entity Government				
The following fee(s) a	ure submitted:	46	. Payment of Fee(s): (Ples	se first reapply any	previously paid	issue fee sh	own above)				
	o small entity discount p	ermitted)	Payment by credit card. Form PTO-2038 is attached.								
Advance Order - #	of Copies 5		The Director is hereby authorized to charge (1000) The Director is hereby authorized (1000) The Director is								
	us (from status indicated		_								
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). TE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in trest as shown by the records of the United States Patent and Trademark Office.											
rest as shown by the n	ecords of the United Sta	tes Patent and Trademark	Office.	ne applicant; a regist	ered attorney or a	gent; or the	assignee or other party in				
Authorized Signature	AL RY	4		Date Feb	ruary 26,	2007	020				

is collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and mitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete some formation of the complete some complete some formation of the complete some complete so

33,251

Registration No.

der the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



LAW OFFICES

KILYK & BOWERSOX, P.L.L.C.

Intellectual Property Law

From the Desk of LUKE A. KILYK*

400 Holiday Court Suite 102 WARRENTON, VA 20186

FAIRFAX OFFICE 3603-E Chain Bridge Road Fairfax, Virginia 22030

Email: lkilyk@kbpatentlaw.com Website: http://www.kbpatentlaw.com

(540) 428-1701 TEI · (540) 428-1720 FAC.:

*Admitted only in PA and DC

(540) 428-1721

PLEASE DIRECT CORRESPONDENCE TO OUR WARRENTON OFFICE

FACSIMILE TRANSMISSION COVER SHEET

DATE:

February 26, 2007

TO:

Mail Stop Issue Fee Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

RE:

U.S. Patent Application No. 10/776,970

Entitled: REAGENT SET AND METHOD FOR DETECTING CHOLESTEROL IN A HIGH DENSITY LIPOPROTEIN OR LOW

DENSITY LIPOPROTEIN [AS AMENDED]

Our Ref.: 3190-011-01

FROM:

Luke A. Kilyk, Esq. >>

FAC. TEL. NO.:

1-571-273-2885

NUMBER OF PAGES (INCLUDING THIS COVER SHEET):

Items Attached: Issue Fee Transmittal - 1 page Fee Transmittal -- 1 page

Credit Card Payment Form - 1 page

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 1-571-273-2885 on February 26, 2007.

Kim Blum Name (Print)

THE INFORMATION CONTAINED IN THIS MESSAGE IS CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY TO WHICH IT IS ADDRESSED. This message may also be an attorney/client communication which is privileged and confidential. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by calling us collect and return the original message to us at the above address by mail. Thank you.

03

FEB 2 6 2007

PTO/SB/17 (10-03)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Unger the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

EEE TOANSMITTAL				Complete if Known						
FEE TRANSMITTAL				Application Number			10/776,970			
for FY 2007				Filing Date		February 11, 2004				
				amed inv	ventor	KISHI et al.				
Effective 10/01/2003. Patent fees are subject to annual revision		Examiner Name			Ralph J. Gitomer					
Applicant Claims small entity status. See 37 CFR	-	Art Unit			1657					
TOTAL AMOUNT OF PAYMENT (\$) 1,715.00			Attorney Docket No.			3190-011-01				
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)								
Check X Credit card Money Other None	з. A	3. ADDITIONAL FEES								
X Deposit Account	Large Fee	Entity Fee	Small Fee	Entity		Fee D	escription		Fee Paid	
Deposit	Code	(\$)	Code	(\$)			·		TOOPEG	
Account 50-0925 Number	1051	130	2051	65	Surcha	ge – late filling	ree or oath			
Deposit Account Name	1052	50	2052	25	Surchar cover s	ge – late provi heet	or			
The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-En	glish specifica				
Charge fee(s) indicated below X Credit any overpayments	1812	2,520	1812	2,520		a request for				
X Charge any additional fee(s) or any underpayment of fee(s)	1804	920	1804	920*	Reques	ting publication				
Charge fee(s) indicated below, except for the filling fee	1805	1,840*	1805	1,840*	Reques	eraction ting publication				
to the above-identified deposit account.						eraction				
FEE CALCULATION	1251	120	2251	60	Extensi	on for reply wil	hin first month			
1. BASIC FILING FEE	1252	450	2252	225			thin second mor	nth		
Large Entity Small Entity Fee Fee Description Fee Paid	1253	1020	2253	510			hin third month			
Code (\$) Code (\$)	1254	1590	2254	795			thin fourth monti	h		
1011 300 2011 150 Utility filing fee	1255 1401	2160 500	2255	1080			thin fifth month			
1012 200 2012 100 Design filing fee	1402	500	2402	250 250		of Appeal a brief in support of an appeal				
	1403	1000	2403	500	-	t for onal heari				
1014 300 2014 150 Reissue filing fee 1005 200 2005 100 Provisional filing fee	1451	1510	1451	1,510	•		ublic use proce	edina		
1000 200 2000 100 Frombional ming lee	1452	500	2452	250		to revive - un	•	cung	\vdash	
SUBTOTAL (1) (\$) 0.00	1453	1500	2453	750	Petition	to revive – uni	intentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1400	2501	700	Utility is	sue fee (or rei:	ssue)		1,400.00	
Fee from Extra Claims below Fee Paid	1502	800	2502	400	Design	issue fee				
Total Claims -20**= X =	1503	1100	2503	550	Plant is:	sue fee				
Independent 3**= X =	1460	130	1460	130	Petition	to the Comm				
Multiple Dependent	1807	50	1807	60	Process	ing fee for pro				
Large Entity Small Entity	1806	180	1806	180	Submis	sion of Informa	dion Disclosure	Stmt		
Fee Fee Fee Code (\$) Fee Description	8021	40	8021	40			t assignment pe	a		
1202 20 2202 25 Claims in excess of 20	1809	790	2809	395	Filing a	(limes number submission aft (1,129(a))	of properties) er final rejection	ו		
1201 200 2201 100 Independent claims in excess of 3	1810	790	2810	395	For each	n additional inv				
1203 360 2203 180 Multiple dependent claim, if not paid	1801	790	2801	395		d (37 CFR 1.1 for Continued E	129(D)) Examination (RC	E)		
1204 200 2204 100 **Reissue independent claims	1802	900	1802	900	Reques	for expedited	examination			
over original patent 1205 50 2205 25 "Reissue claims in excess of 20 and over original patent"	Other f		i or a design application						300.00	
SUBTOTAL (2) (\$) 0.00	Other	ee (spe	cify) <u>5 c</u>	coples of	issued F	Patent @ \$3.0	00 each		15.00	
or number previously paid, if greater; For Reissues, see above	*Reduce	ed by Bas					(\$) 1,715			
SUBMITTED BY Complete (7 applicable)										
Name (Print/Type) Luke A. Kilyk		tstration N orney/Ager		33,251			Telephone		28-1701	
Signature L. a. 7/11	MIK	- myrriger	-/	,			Date	February		

WARNING: Information on this form may become public. Credit card Information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SERD FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Thereby correspondence is being faccinille transmitted to the United States Patent and Trademark Office. Ear No.

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 1-571-273-2885 on February 26, 2007.

Kim Blum Name (Print) Signature